

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001542

FILED
Apr 28, 2008
Secretary of State

Entity Name: SUNNY ISLES BEACH CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

1870 NE 171 ST
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1870 NE 171 ST
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 59-0794687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANSDORF, ABRAHAM B
1870 NE 171 ST
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POPPER, MELANIE T
Address: 1750 NE 167 ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: V () Delete
Name: TEMPLER, PAUL
Address: 8811 CLEARY BLVD
City-St-Zip: PLANTATION, FL 33324

Title: V () Delete
Name: LANDMEIER, DREW
Address: 4300 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: S () Delete
Name: ADGER, ELLIS
Address: 9250 W FLAGLER ST
City-St-Zip: MIAMI, FL 33174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: LEMAY, PAUL
Address: 1205 NE 163 ST
City-St-Zip: N MIAMI BEACH, FL 33162

Title: V (X) Change () Addition
Name: CHERNOFF, JAY
Address: 1500 SAN REMO AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: MANSDORF, ABRAHAM
Address: 17971 BISCAYNE BLVD
City-St-Zip: AVENTURA, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABRAHAM B MANSDORF

TREA

04/28/2008

Electronic Signature of Signing Officer or Director

Date